

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726 X678

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Faith Establishm U310 Owner Owner's A	n Harvest ment Address (number and street, city, state, zip code) Button town Rd, Greenville IN 47124 Purpose: Routine Address				Date of Inspection (mm/dd/yr) 03-6-19 0-9 Follow-up Release Date NO 10 dayS Summary of Violations:
Person in Charge Mark Avery				3. Complaint	CONCZRO
Mark Avery				4. Pre-Operational	$C \sim NC \sim RC$
Responsible Person's E-mail				5. Temporary 6. HACCP	Menu Type (See back of page)
Certified Food Handler n/a				7. Other (list)	1345
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"					
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"					
Section#	C/NC	R	Narrative		To Be Corrected By
202	NC		Observed dust and debiis	separated.	Today
431	NC		Observed dust and debiis	under storage	1 week
			Shelves,		
	-				
	_				
	-				
Received by (name and title printed): Inspected by (name and title printed):					
mark S. Avery Paster Thomas Snider, EHS Tyler Smith					
Received by (signature):				Inspected by (signature);	Tyler On Ricto
ce;			Cc:	<u> </u>	cc: